U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

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FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

MSV			
1. File Number U - 606	7	2. Fiscal Year Covered From:	
		1 / 1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.		Name, file number, and address of labor organization.	
Name Joseph	Mann	Name Laborers' Local 149 Union	
		Labor Organization File Number 001-993	
P.O. Box, Bidg., Room No., if any	Unit C	P.O. Box, Building and Room Number, if any Unit C	
Street 2418 W. Indian Tr	cail	Street 2418 W. Indian Trail	
City Aurora		City Aurora	
State Illinois	ZIP Code + 4 60506	State Illinois ZIP Code + 4 60506	
. Position in labor organization.	Business Manager		
A. Held an interest in, engaged in	(except as specified in the e	spouse or minor child directly or indirectly had any of the following interests exclusions set forth in the instructions): , or derived income or other economic benefit of zation represents or is actively seeking to represent.	
. Held an interest in, engaged in nonetary value from an employ	(except as specified in the entransactions (including loans) with the whose employees your organizer whose employees your organizer.	exclusions set forth in the instructions): or derived income or other economic benefit of	
. Held an interest in, engaged in nonetary value from an employ . Name and address of Employer (i	(except as specified in the entransactions (including loans) with the whose employees your organizer whose employees your organizer.	or derived income or other economic benefit of cation represents or is actively seeking to represent.	
. Held an interest in, engaged in nonetary value from an employ Name and address of Employer (i	(except as specified in the entransactions (including loans) with the whose employees your organizer whose employees your organizer.	or derived income or other economic benefit of station represents or is actively seeking to represent.	
Held an interest in, engaged in nonetary value from an employ Name and address of Employer (i Name	(except as specified in the entransactions (including loans) with ver whose employees your organization trade name, if any).	or derived income or other economic benefit of cation represents or is actively seeking to represent.	
Held an interest in, engaged in innetary value from an employ. Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	(except as specified in the entransactions (including loans) with ver whose employees your organization trade name, if any).	or derived income or other economic benefit of cation represents or is actively seeking to represent.	
N. Held an interest in, engaged in nonetary value from an employ. Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	(except as specified in the entransactions (including loans) with ver whose employees your organization trade name, if any).	, or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
A. Held an interest in, engaged in nonetary value from an employ Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bidg., Room No., if any	(except as specified in the entransactions (including loans) with ver whose employees your organization trade name, if any).	, or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
Held an interest in, engaged in conetary value from an employ. Name and address of Employer (in the Name in t	(except as specified in the entransactions (including loans) with ver whose employees your organization trade name, if any).	, or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
Held an interest in, engaged in nonetary value from an employ. Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	(except as specified in the entransactions (including loans) with ver whose employees your organization including trade name, if any). ZIP Code + 4	, or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
A. Held an interest in, engaged in nonetary value from an employ in Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State 15. Signature and verification. In Submitted in this report (including)	(except as specified in the entransactions (including loans) with the whose employees your organization reducing trade name, if any). ZIP Code + 4 The undersigned declares, under penalthe information contained in any accomp	axclusions set forth in the instructions): , or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of interest, Transaction, or income. 7.b. Amount	
A. Held an interest in, engaged in nonetary value from an employ in Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State 15. Signature and verification. In Submitted in this report (including)	(except as specified in the entransactions (including loans) with the whose employees your organization reducing trade name, if any). ZIP Code + 4 The undersigned declares, under penalthe information contained in any accomp	y of Perjury and other applicable penalties of the law, that all of the information panying documents), has been examined by the signatory and is, to the best of the	

Name of Person Filing Joseph Mann	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or including with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise	
8. Name and address of Business (including trade name, if any). Name Baum Sigman Auerbach & Neuman, Ltd. Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 2200 Street 200 West Adams Street City Chicago State Illinois ZIP Code + 4 60606-5231	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Fox Valley Laborers Welfare Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Bldg. B, Suite 206	Baum Sigman provides legal services to the Trust Funds. I am a trustee on the Welfare Fund.	
Street 2400 Big Timber Road	11.b. Approximate dollar value of such dealing. \$30,450	
City Elgin	12.a. Nature of interest held or income received.	
State Illinois ZIP Code + 4 60123	Received Chicago Bulls tickets valued at \$183.I was provided several meals during the year with a total value of \$66.	
	12.b. Amount. \$249	
C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money	er parts A and B above)	
13.a. Name and address of Employer or Labor Relations Consultant	14.a, Nature of payment.	
(including trade name, if any).		
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
The state of the s		
Street		
City State ZIP Code + 4		

Name of Person Filing Joseph Mann	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name AFL-CIO Investment Trust	a. Labor Organization	
Trade Name, if any:	A. Lorent Cigan Lation	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1717 K Street, NW	c. Employer	
City Washington DC)	
State District of Columbia ZIP Code + 4 20036		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	i de l'annance de dell'ennance de la company de la comp
Name Fox Valley Laborers Welfare Fund	This company provides investment me services to the Funds.	anagement
Trade Name, if any:		
P.O. Box, Bidg., Room No., if any		
Street 2400 Big Timber Road City Elgin		
State Illinois ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing.	\$49,000
	12.a. Nature of interest held or income received.	Company of the Compan
	At Board of Trustees meetings held 30, 2004, the Trustees met with the manager to discuss investment police. The investment manager paid for dis- recreational activities.	e investment cy and results.
	12.b. Amount.	\$56

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name ASB Capital Management	
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 7501 Wisconsin Avenue	c. Employer
City Bethesda	
State Maryland ZIP Code + 4 20814	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Fox Valley Laborers Welfare Fund	This company provides investment management services to the Funds.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street 2400 Big Timber Road	
City Elgin	
State Illinois ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing. \$55,275
	12.a. Nature of interest held or income received.
	At Board of Trustees meetings held on July 29 and 30, 2004, the Trustees met with the investment manager to discuss investment policy and results. The investment manager paid for dinner and recreational activities.
	12.b. Amount. \$56

Name of Person Filing Joseph Mann	File Number U-
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r 			
8. Name and address of Business	(including trade name, if any).	9. Business deals with:	
Name Dimensional Fund Advisors		a. Labor Organization	
Trade Name, if any:		See to Total	
P.O. Box, Bldg., Room No., if any		b. Trust	
Street 23 Park Place		c. Employer	
City Cranbury		}	
State New Jersey	ZIP Code + 4 08512		
10. If 9.b. or 9.c. is checked give trus	st or employer's name.	11.a. Nature of such dealing.	. \$45 CO AN GO. A \$4 COMMONDANISES AND AN A. 2 CO S MONTH, A 2 CO AN AN A 2 CO AN
Name Fox Valley Labore	rs Welfare Fund	This Company provides investment m services to the Funds.	anagement
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Street 2400 Big Timber Ro			
City Elgin			
State Illinois	ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing.	\$16,000
		12.a. Nature of interest held or income received.	1277000001277799900000000000000000000000
		At Board of Trustees meetings held 30, 2004, the Trustees met with th manager to discuss investment poli The investment manager paid for di recreational activities.	e investment cy and results.
		12.b. Amount.	\$56

Name of Person Filing Joseph Man	n	File Number U-

8. Name and address of Busines	s (including trade name, if any).	9. Business deals with:		
Name Fox Valley Labore	ers Welfare Fund	a. Labor Organization		
Trade Name, if any:		a. Labor Organization		
P.O. Box, Bldg., Room No., if any	/ Suite 206B	b. Trust		
Street 2400 Big Timber R	load	c. Employer		
City Elgin				
State Illinois	ZIP Code + 4 60123-7835			
10. If 9.b. or 9.c. is checked give tru	st or employer's name.	11.a. Nature of such dealing.		
Name	7 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T	I am a trustee for the Welfare Fur created by the Union and employers of the members.		
Trade Name, if any:	P. 11 State Land A. Printer and P. P. P. 1 Comment of the Printer and Printer			
P.O. Box, Bldg., Room No., if any				
Street	And the control of a principle of the control of the principle of the control of			
City				
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0	
		12.a. Nature of interest held or income received.		
		I attended Board of Trustees meeting 29 and 30, 2004 as mandated by ERI for the Trustees to discuss Fund is received reimbursement for my experimentings.	SA and the DOL ousiness. I	
		12.b. Amount.	\$1,255	

Name of Person Filing Joseph Mann	File Number U-
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8. Name and address of Business	(including trade name, if any).	9. Business deals with:	
Name Lincoln Capital	22 - Carrier vol. 25 de Arrier vol. 277 rende vol. 254 de Arrier vol.		
Trade Name, if any:		a. Labor Organization	
P.O. Box, Bldg., Room No., if any	Suite 2100	b. Trust	
Street 200 S. Wacker Driv	See and and a second programment of the seco	c. Employer	
City Chicago			
State Illinois	ZIP Code + 4 60606		
10. If 9.b. or 9.c. is checked give trus	st or employer's name.	11.a. Nature of such dealing.	
Name Fox Valley Laborer	rs Welfare Fund	This company provides investment management services to the Funds.	
Trade Name, if any:	AND THE STREET OF THE STREET O		
P.O. Box, Bldg., Room No., if any			
Street 2400 Big Timber Ro	bad		
City Elgin			
State Illinois	ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing.	\$15,008
		12.a. Nature of interest held or income received.	
		At Board of Trustees meetings held 30, 2004, the Trustees met with the manager to discuss investment poli The investment manager paid for di recreational activities.	ne investment cy and results.
		12.b. Amount.	\$56

Name of Person Filing Joseph Mann	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Missouri Valley Partners Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any Suite 500		
Street 135 N. Meramac	c. Employer	
City St. Louis		
State Missouri ZIP Code + 4 63105	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Fox Valley Laborers Welfare Fund Trade Name, if any:	This company provides investment ma services to the Funds.	nagement
P.O. Box, Bldg., Room No., if any		
Street 2400 Big Timber Road City Elgin		
State Illinois ZIP Code + 4 50123	11.b. Approximate dollar value of such dealing.	\$160,000
	12.a. Nature of interest held or income received.	
	At Board of Trustees meetings held 30, 2004, the Trustees met with the manager to discuss investment policy. The investment manager paid for din recreational activities.	investment y and results.
	12.b. Amount.	\$56

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Name of Person Filing	Joseph	Mann				⊦ile N	umber U-			
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Multi-Employer Property Trust	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 700 Thirteenth Street, NW 1150	c. Employer	
City Washington DC	Prince Pr	
State District of Columbia ZIP Code + 4 20005	Territory	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Fox Valley Laborers Welfare Fund	This company provides investment m services to the Funds.	anagement
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 2400 Big Timber Road		
City Elgin		
State Illinois ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing.	\$101,000
	12.a. Nature of interest held or income received.	
	At Board of Trustees meetings held 30, 2004, the Trustees met with th manager to discuss investment poli The investment manager paid for di recreational activities.	e investment cy and results.
	12.b. Amount.	\$56

Name of Person Filing Joseph Mann	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Northern Trust Company	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 50 S. LaSalle Street	c. Employer	
City Chicago		
State Illinois ZIP Code + 4 60675		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Fox Valley Laborers Welfare Fund	This company provides investment makes to the Funds.	inagement
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 2400 Big Timber Road	And the second s	
City Elgin		engga di 1919 mar ar annya ya bi di ta manar ar anca a di ga ar anca ar anca ar a
State Illinois ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing.	\$20,000
	12.a. Nature of interest held or income received.	#
	At Board of Trustees meetings held 30, 2004, the Trustees met with the manager to discuss investment policy. The investment manager paid for direcreational activities.	e investment by and results.
	12.b. Amount.	\$56

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Name of Person Filing Joseph Mann	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Pacific Investment Mgmt Co LLC	a. Labor Organization
Trade Name, if any:	Longitude Company Comp
P.O. Box, Bldg., Room No., if any	b. Trust
Street 840 Newport Center Drive	c. Employer
City Newport Beach	NAME
State California ZIP Code + 4 92660	rupo de 173 g
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Fox Valley Laborers Welfare Fund	This company provides investment management services to the Funds.
Trade Name, if any P.O. Box, Bldg., Room No., if any Street 2400 Big Timber Road	
City Elgin	
State Illinois ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing. \$219,000
	12.a. Nature of interest held or income received.
	At Board of Trustees meetings held on July 29 and 30, 2004, the Trustees met with the investment manager to discuss investment policy and results. The investment manager paid for dinner and recreational activities.
	12.b. Amount. \$44

Name of Person Filing Joseph Mann	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name State Street Global Advisors	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street One International Place	c. Employer	
City Boston		
State Massachusetts ZIP Code + 4 02110		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Fox Valley Laborers Welfare Fund	This company provides investment management services to the Funds.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		-
Street 2400 Big Timber Road		
City Elgin		
State Illinois ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing.	\$1,800
	12.a. Nature of interest held or income received.	
	At Board of Trustees meetings held on July 29 30, 2004, the Trustees met with the investment manager to discuss investment policy and resul The investment manager paid for dinner and recreational activities.	t . 1
	12.b. Amount.	\$56

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Name of Person Filing Joseph Mann	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Watson Wyatt Company	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 191 N. Wacker Drive	c. Employer	
City Chicago		
State Illinois ZIP Code + 4 60606		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Fox Valley Laborers Welfare Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 2400 Big Timber Road City Elgin	This company provides actuarial and consul services to the Funds.	ting
State Illinois ZIP Code + 4 60123	11.b. Approximate dollar value of such dealing.	\$102,000
	12.a. Nature of interest held or income received.	·
	At Board of Trustees meetings held on July 30, 2004, the trustees met with the actuar discuss the activities of the Punds. The paid for dinner and recreational activitie	y to actuary
	12.b. Amount.	\$56

Name of Person Filing Joseph Mann

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Laborers' Training & Apprentice Fund

Trade Name, if any:

P.O. Box, Bidg., Room No., if any BOX 88658

Street 1200 Old Gary Ave.

CityCarol Stream

State Illinois

ZIP Code + 4 60188

9. Business deals with:

a. Labor Organization

 $X \quad \text{ b. Trust }$

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

NameLaborers' Local #149

Trade Name, if any:

P.O. Box, Bidg., Room No., if any

Street 2418 W. Indian Trail Unit C

City Aurora

State Illinois ZIP Code + 4

60506

11.a. Nature of such dealing.

Training facility for apprentice and journeyman laborers'.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Attendance at the February Apprentice Graduation Banquet held at The Carlisle in Lombard, Illinois.

12.b. Amount.

Name of Person Filing File Number U-Joseph Mann B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Marco Consulting a. Labor Organization Trade Name, if any: X b. Trust P.O. Box, Bkdg., Room No., if any c. Employer Street 550 W. Washington Blvd. 9 Fl. Chicago State Illinois ZIP Code + 4 60661 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Investment Monitor for funds Name Fox Valley Laborers' Trust Fund Trade Name, if any: P.O. Box, Bidg., Room No., if any Street2400 Big Timber Rd. Suite 206 11.b. Approximate dollar value of such dealing. City Elgin 12.a. Nature of interest held or income received. ZIP Code + 4 60123 2 tickets to Blackhawks game @ 125.00 Illinois each.

12.b. Amount.

Name of Person Filing File Number U-Joseph Mann B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Amalgamated Bank a. Labor Organization Trade Name, if any: X b. Trust P.O. Box, Bldg., Room No., if any c. Employer -Street 1 W. Monroe Chicago ZIP Code + 4 60603 State Illinois 11.a. Nature of such dealing. 10, if 9.b, or 9.c. is checked give trust or employer's name. Amalgamated manages money for the Chicagoland Laborers' Training Trust training funds. Trade Name, if any: P.O. Box, Bldg., Room No., if any $_{BOX}\ 88658$ Street 1200 Old Gary Ave. 11,b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Carol Stream ZIP Code + 4 60188 2 tickets to Bears Game Illinois

12,b. Amount.

Name of Person Filling Joseph Mann File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Peter F. Ferracuti, P.C.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 110 E. Main

City Ottawa

State Illinois

ZIP Code + 4 61350

9. Business deals with:

x a. Labor Organization

b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Laborers' Local: #149

Trade Name, if any:

P.O. Box, Bidg., Room No., if any

Street 2418 W. Indian Trail Unit C

City Aurora

State Illinois

ZIP Code + 4 60506

11.a. Nature of such dealing.

Work Comp Law Firm

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

3 - Boxes Fruit

12.b. Amount.

Name of Person Filing Joseph Mann	File Number U-
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.	
8. Name and address of Business (including trade name, if any). Name Horwitz & Horwitz Association Trade Name, if any:	9. Business deals with: X a. Labor Organization
P.O. Box, Bldg., Room No., if any Street 25 East Washington St. Suite 900	b. Trust c. Employer :
City Chicago State Illinois ZIP Code + 4 60602	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Laborers ' Local #149 Trade Name, if any:	11.a. Nature of such dealing. Work Comp Law Firm
P.O. Box, Bldg., Room No., if any Street 2418 W. Indian Trail Unit C	
City Aurora State Illinois ZIP Code + 4 60506	11.b. Approximate doltar value of such dealing. 12.a. Nature of interest held or income received. 4 tickets White Sox Game @ 75.00 a piece.

12.b. Amount.